UNITED STATES BANKRUPTCY COURT FOR THE WESTERN DISTRICT OF VIRGINIA

In re:	Frank & Andrea Clauden	Chapter	13
	Debtor(s).	Case No.	19-60889

CERTIFICATION OF MAILING AND/OR SERVICE OF CHAPTER 13 PLAN

I certify that a true and correct copy of the chapter 13 plan or the amended chapter 13 plan and amended plan cover sheet, filed electronically with the Court on April 18, 2019, has been mailed by first class mail postage prepaid to all creditors, equity security holders, and other parties in interest, including the United States Trustee, on April 19, 2019.

If the plan contains (i) a request under section 522(f) to avoid a lien or other transfer of property exempt under the Code or (ii) a request to determine the amount of a secured claim, the plan must be served on the affected creditors in the manner provided by Rule 7004 for service of a summons and complaint. I certify that a true and correct copy of the chapter 13 plan has been served on the following parties pursuant to Rule 7004:

Name	Address	Method of Service
C & F Finance Company	Registered Agent CT Corporation System 4701 Cox Road, Suite 285 Glen Allen, VA 23060	US Mail

/s/ Michael P. Regan

Counsel for Debtor(s)

			Document Page 2 of 2			
Fill in th	is information to	identify your case:				
Debtor 1	Frank First Name	Davis Middle Nam	Clauden ne Last Name			
Debtor 2 (Spouse, if	Andrea filling) First Name	Middle Nam	Clauden ne Lasi Name	Ī	plan,	k if this is an amended and list below the
United St	ates Bankruptcy Cou	rt for the: Western	District Of: Virginia (State)			ons of the plan that have changed.
Case nur (If known)	nber: <u>19-60889</u>					
Offic	cial Form 1	13				
Cha	pter 13	Plan				12/17
Part	1: Notices					
To Cred	do not co In the follow ditors: Your right You shou have an a If you opp confirmati Court. The Bankrupto The follow includes be ineffect	comply with local rule owing notice to credit is may be affected to lead this plan care of the plan's treatment on at least 7 days be a Bankruptcy Court of Rule 3015. In addition matters may be each of the following the plan's set out later of the set out later of the following the plants of the following the set out later of the set out later of the following the set out later of the set ou	ment of your claim or any provision of this plan, your confirmation, and confirm this plan without further notice if no outline, you may need to file a timely proof of claim of the particular importance. Debtors must check on the proof of the particular importance.	ified, or eliminated. one in this bankruptcy case ou or your attorney must file unless otherwise ordered be bjection to confirmation is fin order to be paid under are one box on each line to stated" or if both boxes are c	e. If you do an object by the Bar illed. See ny plan. ate wheth	tion to nkruptcy ner or not the plan
	payment or no p	payment at all to the	e secured creditor			
1.2	Section 3.4	udicial lien or non	possessory, nonpurchase-money security inte	erest, set out in	cluded	✓ Not included
1.3	Nonstandard pr	ovisions, set out in	Part 8	☑ In	cluded	☐ Not included
Part 2	Plan Payn	nents and Length	ı of Plan			
2.1 De	btor(s) will make	regular payments t	o the trustee as follows:			
\$	600.00	per month for	52 months			

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2.2	Regular payments to the trustee v	an be made from future	e income in the following	, manner.			
	Check all that apply.						
	Debtor(s) will make payments po	ırsuant to a payroll dedu	ction order.				
	Debtor(s) will make payments di	-					
	Other (specify method of payme	nt):					
.3	Income tax refunds.						
	Check one.						
	Debtor(s) will retain any income						
	Debtor(s) will supply the trustee turn over to the trustee all incom	with a copy of each incor e tax refunds received d	me tax return filed during t uring the plan term.	he plan term v	within 14 days	s of filing the retu	urn and will
	Debtor(s) will treat income tax re Tax returns used to fund plan.	funds as follows:					
.4	Additional payments.						
	Check one.						
	None. If "None" is checked, the	rest of § 2.4 need not be	completed or reproduced.				
	Debtor(s) will make additional pa and date of each anticipated pay	yment(s) to the trustee fi	from other sources, as spe	cified below. [Describe the s	source, estimate	d amount,
	[enter source]		;	\$ 0.00		[anticipated dt]
	The total amount of estimated pay		rovided for in §§ 2.1 and	2.4 is ^{\$} \$31,	200.00		
Pa	rt 3: Treatment of Secured Maintenance of payments and cur	Claims	rovided for in §§ 2.1 and	2.4 is \$ <u>\$31,</u>	200.00		
Pa	rt 3: Treatment of Secured	Claims re of default, if any.			200.00		
Pa	Treatment of Secured Maintenance of payments and cur Check one.	re of default, if any. rest of § 3.1 need not be surrent contractual installiced in conformity with an cified below. Any existing reate stated. Unless other Rule 3002(c) control own contrary timely filed proof ateral listed in this paragrill cease, and all secured	e completed or reproduced ment payments on the sec ly applicable rules. These g arrearage on a listed cla herwise ordered by the co- rer any contrary amounts lif of claim, the amounts stat raph, then, unless otherwisd d claims based on that coll	d. cured claims li payments will im will be paid urt, the amour sted below as ted below are se ordered by lateral will no l	isted below, w I be disbursed d in full throug nts listed on a s to the curren controlling. If the court, all	d either by the truich disbursements proof of claim fint installment pay relief from the a payments under	ustee or s by the led before the yment and utomatic stay
Pa	Maintenance of payments and cur Check one. None. If "None" is checked, the the applicable contract and notic directly by the debtor(s), as spectrustee, with interest, if any, at the filing deadline under Bankruptcy arrearage. In the absence of a collaboration is ordered as to any item of collaborations.	re of default, if any. rest of § 3.1 need not be surrent contractual installiced in conformity with an cified below. Any existing reate stated. Unless other Rule 3002(c) control own contrary timely filed proof ateral listed in this paragrill cease, and all secured	ment payments on the sector applicable rules. These grearage on a listed clatherwise ordered by the correr any contrary amounts lift of claim, the amounts staff raph, then, unless otherwised claims based on that coll rather than by the debtor (cured claims li payments will im will be paid urt, the amoun sted below are se ordered by lateral will no l s).	isted below, w I be disbursed d in full throug nts listed on a s to the curren controlling. If the court, all	d either by the truich disbursements proof of claim fint installment pay relief from the a payments under	ustee or s by the led before the yment and utomatic stay
Pa	Maintenance of payments and cur Check one. None. If "None" is checked, the The debtor(s) will maintain the of the applicable contract and notic directly by the debtor(s), as spectrustee, with interest, if any, at the filling deadline under Bankruptcy arrearage. In the absence of a collision of collagoration of the collago	re of default, if any. rest of § 3.1 need not be current contractual installiced in conformity with an cified below. Any existing the rate stated. Unless of Paule 3002(c) control over contrary timely filed proof ateral listed in this paragrill cease, and all secured disbursed by the trustee	ment payments on the sec y applicable rules. These g arrearage on a listed cla herwise ordered by the cor er any contrary amounts li f of claim, the amounts stat raph, then, unless otherwis d claims based on that coll rather than by the debtor(Current installment payment (including \$	cured claims li payments will im will be paid urt, the amoun sted below are se ordered by lateral will no l s).	isted below, will be disbursed in full throughts listed on a to the curren controlling. If the court, all longer be trea	d either by the truth disbursements in proof of claim finit installment pay relief from the apayments under sted by the plan. Monthly plan payment on arrearage	ustee or s by the led before the ment and utomatic stay this The final Estimated total payments by
Pa	Maintenance of payments and cur Check one. None. If "None" is checked, the The debtor(s) will maintain the of the applicable contract and notic directly by the debtor(s), as spectrustee, with interest, if any, at the filling deadline under Bankruptcy arrearage. In the absence of a collision of collagoration of the collago	re of default, if any. rest of § 3.1 need not be current contractual installiced in conformity with an cified below. Any existing the rate stated. Unless of Paule 3002(c) control over contrary timely filed proof ateral listed in this paragrill cease, and all secured disbursed by the trustee	ment payments on the sector applicable rules. These grearage on a listed clatherwise ordered by the conternant of claim, the amounts state raph, then, unless otherwise diclaims based on that collinating the debtor of the conternant of the collination of the content of the collination of the collin	cured claims li payments will im will be paid urt, the amoun sted below are se ordered by lateral will no l s).	isted below, with the disbursed in full throughts listed on a set to the current controlling. If the court, all longer be treat the controlling in the court, all longer be treat the controlling in the court, all longer be treat longer be treat longer be treat longer be treatly in the court, all longer be treatly longer by longer be treatly longer by lo	d either by the truth disbursements in proof of claim finit installment pay relief from the apayments under sted by the plan. Monthly plan payment on arrearage	ustee or s by the led before the yment and utomatic stay this The final Estimated total payments by trustee

Insert additional claims as needed.

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		ty, payment of fully s			ion of underse	cured claims	. Check one.	
		e rest of § 3.2 need no	•	•				
		ph will be effective o	•		•			
listed below, th <i>claim</i> . For sect claim filed in a	ne debtor(s) sta ured claims of q ccordance with	e court determine the v te that the value of the governmental units, un the Bankruptcy Rules I in full with interest at t	secured claim less otherwise o controls over a	should be as se ordered by the c ny contrary amo	t out in the colucture, the value	ımn headed <i>A</i> of a secured o	mount of seculaim listed in a	red a proof of
plan. If the ame as an unsecure	ount of a credit ed claim under	aim that exceeds the a or's secured claim is li Part 5 of this plan. Unl ny contrary amounts lis	sted below as h less otherwise o	aving no value, ordered by the c	the creditor's a	llowed claim w	ill be treated i	n its entirety
		below as having value s) until the earlier of:	e in the column	headed <i>Amount</i>	of secured cla	<i>im</i> will retain th	ne lien on the	property interes
(a) payment o	f the underlying	g debt determined unde	er nonbankrupto	cy law, or				
(b) discharge	of the underlyir	ng debt under 11 U.S.C	C. § 1328, at wh	ich time the lien	will terminate	and be release	d by the credi	tor.
Name of Creditor	Estimated amount of creditor's total claim	Collateral	Value of Collateral	Amount of claims senior to creditor's claim		Interest rate	Monthly payment to creditor	Estimated total of monthly payments
C & F Finance Company	\$ 6,000.00	2010 Dodge Charger	\$ 4,575.00	\$	s	6.00 %	\$ 36.00	\$ 5,010.49
Insert additional cl	aims as neede	d.						
3.3 Secured claims e.	xcluded from	11 U.S.C. § 506.						
Check one.								
	" is checked, th	ne rest of § 3.3 need no	ot be completed	or reproduced.				
	ed below were	either:						
		re the petition date and	d secured by a p	ourchase money	security intere	st in a motor v	ehicle acquire	ed for the
	of the debtor(s)	•						
(1) incurred within personal use o		oetition date and secur	ed by a purchas	se money securi	ity interest in ar	ny other thing	of value.	

Name of Creditor	Collateral	Amount of claim	Interest rate	Monthly plan payment	Estimated total payments by trustee
Aaron Inc.	Furniture	\$ <u>1,831.57</u>		\$ 106.66 Distributed by: Trustee Debtor(s)	\$ 1,919.80

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Name of Creditor	Collateral	Amount of claim	Interest rate	Monthly plan payment	Estimated tota payments by trustee
Aaron Inc.	2019 Stove & tv	\$ 1,267.99		\$ 73.84 Distributed by:	\$ 1,329.07
				✓ Trustee	
				Debtor(s)	

3.4 Lien avoidance.

Check one.

✓ None. If "None" is checked, the rest of § 3.4 need not be completed or reproduced.

The remainder of this paragraph will be effective only if the applicable box in Part 1 of this plan is checked.

The judicial liens or nonpossessory, nonpurchase money security interests securing the claims listed below impair exemptions to which the debtor(s) would have been entitled under 11 U.S.C. § 522(b). Unless otherwise ordered by the court, a judicial lien or security interest securing a claim listed below will be avoided to the extent that it impairs such exemptions upon entry of the order confirming the plan. The amount of the judicial lien or security interest that is avoided will be treated as an unsecured claim in Part 5 to the extent allowed. The amount, if any, of the judicial lien or security interest that is not avoided will be paid in full as a secured claim under the plan. See 11 U.S.C. § 522(f) and Bankruptcy Rule 4003(d). If more than one lien is to be avoided, provide the information separately for each lien.

Information regarding judicial lien or security interest	Calculation of lien avoidar	ice		Treatment of remaining secured claim
Name of creditor	a. Amount of Lien b. Amount of all other liens	\$		Amount of secured claim after avoidance (fine a minus line f)
Collateral	c. Value of claimed exemptions d. Total of adding lines a, b, and c	+ ; \$	0.00	Interest rate (if applicable) %
Lien identification (such as judgment date, date of lien recording, book and page number)	e. Value of debtor(s)' interest in property f. Subtract line e from line d.	\$	0.00	Monthly payment on secured claim \$ Estimated total payments on secured
	Extent of exemption impairment (Check applicable box): Thin is equal to or greater than line a			claim \$
	The entire lien is avoided. (Do not complete the next column.) Line f is less than line a.			
	A portion of the lien is avoided. (Complete the next column.)			

Insert additional claims as needed.

3.5 Surrender of collateral.

Check one.

None. If "None" is checked, the rest of § 3.5 need not be completed or reproduced.

	Name of Creditor	Collateral							
	Insert additional claims as needed.								
P	art 4: Treatment of Fees and Priority Claims								
	Consent								
4.1	General Trustee's fees and all allowed priority claims, including domest postpetition interest.	tic support obligations other than those treated in § 4.5, w	ill be paid in full without						
4.2	Trustee's fees								
	Trustee's fees are governed by statute and may change during during the plan term, they are estimated to total \$ 3,120.00	the course of the case but are estimated to be 10.000 %	of plan payments; and						
4.3	Attorney's fees								
	The balance of the fees owed to the attorney for the debtor(s)	is estimated to be \$ <u>3,910.00</u> .							
4.4	Priority claims other than attorney's fees and those treated in § 4.5. Check one.								
	None. If "None" is checked, the rest of § 4.4 need not be co	ompleted or reproduced.							
	The debtor(s) estimate the total amount of other priority cla	ims to be \$							
4.5	Domestic support obligations assigned or owed to a governmental unit and paid less than full amount, Check one.								
	None. If "None" is checked, the rest of § 4.5 need not be co	ompleted or reproduced.							
	The allowed priority claims listed below are based on a domestic support obligation that has been assigned to or is owed to a governmental unit and will be paid less than the full amount of the claim under 11 U.S.C. § 1322(a)(4). This plan provision requires that payments in § 2.1 be for a term of 60 months; see 11 U.S.C. § 1322(a)(4).								
	roquired that payments in 3 2.7 be for a term of comments,	,							
	Name of Creditor	Amount of claim to be paid	12.1						

Insert additional claims as needed.

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P	art 5:	Treatment of Nonpriority Uns	secured Claims								
5.1	Nonp	riority unsecured claims not separate	ely classified.								
		ed nonpriority unsecured claims that are ling the largest payment will be effective		, pro rata. If more	than one option	on is checked,	the option				
		The sum of \$									
	\checkmark	30.000 % of the total amount of these claims, an estimated payment of \$ 14,580.02									
	/	The funds remaining after disburseme	nts have been made to all other credi	tors provided for	in this plan.						
		If the estate of the debtor(s) were liquid Regardless of the options checked abo					amount.				
5.2	Maint	enance of payments and cure of any	default on nonpriority unsecured of	claims. Check on	ıe.						
	V	None. If "None" is checked, the rest of	§ 5.2 need not be completed or reproc	duced							
		debtor(s), as specified below. The claim The final column includes only payment Name of creditor	-	•	Estimated to	otal	e trustee.				
			\$	\$	\$						
			Distributed by:								
			Trustee								
			Debtor(s)								
	Ins	ert additional claims as needed.									
5	.3 Oth	er separately classified nonpriority ι	Insecured claims. Check one.								
		None. If "None" is checked, the rest of		duced.							
		The nonpriority unsecured allowed clair			ated as follows	š					
		Name of creditor	Basis for separate classification a	and treatment	mount to be aid on claim	Interest rate (if applicable)	Estimated total amount of payments				
		Citifinancial	Foreclosed house	\$ 1.	.00	%	\$ 1.00				

Insert additional claims as needed.

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Pa	art 6:	Executory Con	ntracts and Unexpired Leases				
5.1	The exe	ecutory contracts a	and unexpired leases listed below as rejected. Check one.	re assumed and	will be treated as	s specified. All other executory cor	ıtracts
	None	e. If "None" is check	ked, the rest of § 6.1 need not be comp	oleted or reproduc	ed.		
	Asseto an	umed items. Curre	nt installment payments will be disburs der or rule. Arrearage payments will be	sed either by the t	rustee or directly b	by the debtor(s), as specified below, s il column includes only payments dist	subject oursed
	Na	me of creditor	Description of leased property or executory contract	Current installment payment	Amount of arrearage to be paid	Treatment of arrearage (refer to other plan section if applicable)	Estimated total payments by trustee
1&K	Enterprise	es, LLC	wooden rent to own storage building	\$ 55.40	\$	\$1,250.00 est owed including arrearage will be paid over 24 months.	\$ 1,329.62
				Disbursed by:		This so paid over 2 y monare.	
				✓ Trustee			
				Debtor(s)			
	Check ✓ pl. □ er	ty of the estate will the applicable box: an confirmation. htry of discharge. her:		•:			
8.1			nstandard Plan Provisions cked, the rest of Part 8 need not be con	mpleted or reprod	uced.		
Und Offi	der Bank icial Forn	ruptcy Rule 3015(c) or deviating from i), nonstandard provisions must be set i it. Nonstandard provisions set out else	forth below. A no where in this plar	nstandard provision are ineffective.	on is a provision not otherwise include	ed in the
The	e followi	ng plan provisions	s will be effective only if there is a ch	heck in the box '	Included" in § 1.	3.	
	County	y of Halifax \$1217.77	TACS \$411.74 Town of South Boston \$285	5.58 all paid pro-rata	. Please see Exhib	its A & B hereto attached to the plan.	

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Part 9	H
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Signature(s):

9.1 Signatures of Debtor(s) and Debtor(s)' Attorney

If the Debtor(s) do not have an attorney, the Debtor(s) must sign below; otherwise the Debtor(s) signatures are optional. The attorney for the Debtor(s), if any, must sign below.

must sign below.

/s/ Frank Clauden

Signature of Debtor 1

Executed on 04 / 18 / 2019 MM / DD / YYYY /s/ Andrea Clauden

Signature of Debtor 2

Executed on 04 / 18 / 2019 MM / DD / YYYY

/s/ Michael P. Regan

Signature of Attorney for Debtor(s)

Date

04 / 18 / 2019

MM / DD /YYYY

By filing this document, the Debtor(s), if not represented by an attorney, or the Attorney for Debtor(s) also certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in Official Form 113, other than any nonstandard provisions included in Part 8.

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Exhibit: Total Amount of Estimated Trustee Payments

The following are the estimated payments that the plan requires the trustee to disburse. If there is any difference between the amounts set out below and the actual plan terms, the plan terms control.

a.	Maintenance and cure payments on secured claims (Part 3, Section 3.1 total)		<u></u>
b.	Modified secured claims (Part 3, Section 3.2 total)	;	5,010.49
C.	Secured claims excluded from 11 U.S.C. § 506 (Part 3, Section 3.3 total)	:	3,248.87
d.	Judicial liens or security interests partially avoided (Part 3, Section 3.4 total)	:	
e.	Fees and priority claims (Part 4 total)	;	7,030.00
f.	Nonpriority unsecured claims (Part 5, Section 5.1, highest stated amount)	:	14,580.02
g.	Maintenance and cure payments on unsecured claims (Part 5, Section 5.2 total)	;	
h.	Separately classified unsecured claims (Part 5, Section 5.3 total)	:	1.00
i,	Trustee payments on executory contracts and unexpired leases (Part 6, Section 6.1 total)	:	1,329.62
j.	Nonstandard payments (Part 8, total)	+ :	·
	Total of lines a through j		31,200.00

EXHIBIT A TO PLAN

ATTENTION ALL SECURED CREDITOR LISTED IN PART 3.1

- Please take notice that the debtor intends to continue to make regular payments on your Secured Debt. Accordingly, you, the Secured Creditor Referenced above in Part 3.1, shall send monthly Mortgage/Automobile Statements consistent with your prepetition practice. Sending such statements shall not be considered by the debtors to be a violation of the Automatic Stay.
- Any fees, expenses, or charges accruing on claims set forth in Section 3.1 of this Plan which are noticed to the debtors pursuant to Bankruptcy Rule 3002.1(c) shall not require modification of the debtors' plan to pay them. Instead, any such fees, expenses, or charges shall, if allowed, be payable to the debtors outside the Plan unless the debtor chooses to modify the plan to provide for them.
- If Trustee is paying the mortgage please see Exhibit B to Plan.

ATTENTION ALL SECURED CREDITOR LISTED IN PART 3.2 and 3.3 [ADEQUATE PROTECTION PAYMENTS]

• The debtors purpose to make adequate protection payments other than as provided in Local Rule 4001-2. Unless Otherwise provided herein, the monthly payment amounts listed in Parts 3.2 and 3.3 of this Chapter 13 Plan will be paid as adequate protection beginning prior to confirmation to the holders of allowed secured claims.

ATTENTION ALL SECURED CREDITOR LISTED IN PART 3.3

• Trustee is authorized to pay any arrearages in any unanticipated cases when the debtor is paying the Secured debt.

ATTENTION ALL SECURED CREDITOR LISTED IN PART 3.5

• Any unsecured proof of claim for a claim of deficiency that results from the surrender and liquidation of collateral noted in Part 3.5 of this Plan must be filed by the earlier of the following or such claim shall be forever barred: (1) within 180 days of the date of the date of the first confirmation order confirming a plan providing fore the surrender of collateral, (2) within the time period for the filing of an unsecured deficiency claim as established by any Order granting relief from Automatic Stay with respect to said collateral. Said unsecured proof of claim for a deficiency must include appropriate documentation establishing that the collateral surrendered has been liquidated, and proceeds applied, in accordance with applicable State law.

Treatment and Payment of Claims

- All creditors must timely file a proof of claim to receive payment from the Trustee.
- If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor maybe treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in the case, after the debtor(s) receive a discharge.
- If a claim is listed in the plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
- The Trustee may adjust monthly disbursement amount as needed to pay an allowed secured claim.

STUDENT LOAN RIDER FOR ANDREA CLAUDEN EXHIBIT B TO PLAN

- The female debtor, is not seeking nor does this Plan provide for any discharge, in whole or in part, of her student loan obligations.
- Therefore, this said debtor shall be allowed to seek enrollment in any applicable income-driven repayment plan ("IDR") with the U.S. Department of Education and/or other student loan servicers, guarantors, etc. (Collectively referred to hereafter as "Ed"), without disqualification due to her bankruptcy.
- Ed shall not be required to allow enrollment in any IDR unless the Debtor otherwise qualifies for such plan.
- The said debtor may, if necessary and desired, seek a consolidation of her student loans by separate motion and subject to subsequent court order.
- Upon determination by Ed of her qualification for enrollment in an IDR and calculation of any payment required under such by the Debtor, the Debtor shall, within 30 days, notify the Chapter 13 Trustee of the amount of such payment. At such time, the Trustee or the debtor may if necessary, file a Motion to Modify the Chapter 13 Plan to allow such direct payment of the student loan(s) and adjust the payment to other general unsecured claims as necessary to avoid any unfair discrimination.
- The said debtor shall re-enroll in the applicable IDR annually or as otherwise required and shall, within 30 days following a determination of her updated payment, notify the Chapter 13 Trustee of such payment. At such time, the Trustee or the Debtor may, if necessary, file a Motion to Modify the Chapter 13 plan to allow such direct payment of the student loan(s) and adjust the payment to other general unsecured claims as necessary to avoid any unfair discrimination.
- During the pendency of any application by the Debtor to consolidate her student loans, to enroll in an IDR, direct payment of her student loans under an IDR, or during the pendency of any default in payments of the student loans under an IDR, it shall not be a violation of the stay or other State or Federal Laws for Ed to send the debtor normal monthly statements regarding payments due and any other communications including without limitation, notices of late payments or delinquency. These communications may expressly include telephone calls and emails.
- In the event of any direct payments that are more than 30 days delinquent, the Debtor shall notify her attorney, who will in turn notify the Chapter 13 Trustee, and such parties will take appropriate action to rectify the delinquency.

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 The said debtor's attorney may seek additional compensation by separate applications and court order for services provided in connection with the enrollment and performance under an IDR. Case 19-60889 Doc 6 Filed 04/19/19 Entered 04/19/19 08:34:03 Desc Main Document Page 14 of 20

E-10	WASK 20								
	in this information to identify your			N I-I					
De	btor 1 Frank Davis	s Clauden			_				
	btor 2 Andrea Cla	uden							
Uni	ited States Bankruptcy Court for th	e: WESTERN DISTRIC	T OF VIRGINIA						
	se number 19-60889		_			Check if this is: An amende A supplement	d filing	wing postpetition	chapter
\cap	fficial Form 106I							e following date:	
	chedule I: Your Inc	omo				MM / DD/ Y	YYY		12/15
sup spo	as complete and accurate as pos plying correct information. If you use. If you are separated and yo ch a separate sheet to this form.	ı are married and not fili ur spouse is not filing w	ng jointly, and your ith you. do not inclu	spouse de infor	is livi matic	ing with you, included about your special	ude inf	ormation about	your
Pai	t 1: Describe Employment								
1 _×	Fill in your employment information.		Debtor 1			Debtor 2	or nor	า-filing spouse	
	If you have more than one job, attach a separate page with	Employment status	Employed	Emplo	■ Employed				
	information about additional employers.		☐ Not employed	☐ Not er	☐ Not employed				
		Occupation	Unemployed	Staff Sp	Staff Specialist 2				
	Include part-time, seasonal, or self-employed work.	Employer's name	Employer's name			Duke U	nivers	ity	
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?			1	5 yrs		
Par	t 2: Give Details About Mo	nthly Income							
spou f yo	mate monthly income as of the cuse unless you are separated. u or your non-filing spouse have me space, attach a separate sheet to	ore than one employer, co						·	_
	o opaso, ataon a separate sneet to	ans lomi.				For Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,	rry, and commissions (be calculate what the monthle	efore all payroll y wage would be.	2.	\$	0.00	\$	4,165.62	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	0.00	\$	4,165.62	
					41:				

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	otor 1 otor 2	Frank Davis Clauden Andrea Clauden			Case n	umber (ii	known)	19	-60889			
					For t	Debtor 1			or Debto			
	Cop	by line 4 here	4.		\$		0.00	\$	4	I,165.62	2	
5,	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$		0.00	\$	1	,442.84	1	
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	\$		0.00		
	5c.	Voluntary contributions for retirement plans	50	; .	\$		0.00	\$		0.00		
	5d.	Required repayments of retirement fund loans	50	ł.	\$		0.00	\$		0.00	-	
	5e.	Insurance	5e) .	\$		0.00	\$		0.00	-	
	5f.	Domestic support obligations	5f.		\$		0.00	\$		0.00		
	5g.	Union dues	5g	J.	\$		0.00	\$		0.00		
	5h.	Other deductions. Specify:	5h	+.	\$		0.00	+ \$		0.00)	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		0.00	\$	1	,442.84	1	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7,		\$		0.00	\$	2	2,722.78	3	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	•	\$		0.00	\$		0.00	-	
	8b.	Interest and dividends	8b		\$		0.00	. Ψ \$		0.00		
	8c.	Family support payments that you, a non-filing spouse, or a depend regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$		0.00	\$		0.00		
	8d.	Unemployment compensation	8d	١.	\$		0.00	\$		0.00		
	8e.	Social Security	8e).	\$		0.00	\$		0.00		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.		\$		0.00	\$		0.00)	
	8g.	Pension or retirement income	8g		\$		0.00	\$		0.00		
	8h.	Other monthly income. Specify: allocated monthly tax refund	8h	+.	\$		0.00	+ \$		583.83		
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$		0.00	\$_		583.8	3	
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		0.00	+ \$	2	,306.61	= \$	2 20	06.61
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*=		0.00			,500.01		3,30	.0.01
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Sched ade contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are re	our depe		-				Schedule	e J. +\$		0.00
12.	Add Write appl	the amount in the last column of line 10 to the amount in line 11. The e that amount on the Summary of Schedules and Statistical Summary of Ceies	result is rtain Lia	the bili	e comb ties an	ined mo d Relate	onthly i	ncom a, if it	e. 12.	\$		06.61
										Combi month		ome
13.	Do y	ou expect an increase or decrease within the year after you file this fo No.	rm?								-	
		Yes, Explain:										

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Fill	in this informa	ation to identify y	our case:	Mark Transfer				
Del	btor 1	Frank Davis	Clauder			Chec	k if this is:	
	otor 2 oouse, if filing)	Andrea Cla	uden		*		An amended filing	ving postpetition chapter the following date:
Uni	ted States Bankı	ruptcy Court for the	e: WEST	ERN DISTRICT OF VIRGII	AIA	=	MM / DD / YYYY	
Cas	se number 19	9-60889						
1	(nown)	J-00003						
0	fficial Fo	rm 106J						
S	chedule	J: Your	Expe	nses				12/15
Be info	as complete a complete a	and accurate a	s possible eded, atta	. If two married people a sch another sheet to this	re filing together, bo form. On the top of a	th are equa	ally responsible fo nal pages, write y	or supplying correct cour name and case
Par 1.	rt 1: Descr Is this a joir	ribe Your House nt case?	ehold					
	☐ No. Go to							
	Yes. Doe	s Debtor 2 live	in a separ	ate household?				
	■ N □ Y		st file Offic	al Form 106J-2, <i>Expenses</i>	for Separate Househ	old of Debt	or 2.	
2.		e dependents?			,			
×	Do not list Do	•	Yes.	Fill out this information for each dependent	Dependent's relatio		Dependent's age	Does dependent live with you?
	Do not state dependents				Son		14	□ No
	dopendents	names.			3011		14	■ Yes □ No
								□ Yes
				×	5			□No
								☐ Yes
								□ No
3.	expenses of	enses include f people other t		No Yes	-			☐ Yes
	•	d your depende	nts? —	103				
		ate Your Ongoi						
exp	imate your ex enses as of a licable date.	penses as of your date after the l	our bankri bankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this for lemental <i>Schedule J</i>	m as a sup , check the	oplement in a Cha box at the top of	pter 13 case to report the form and fill in the
Incl the	ude expenses	s paid for with i	non-cash d	government assistance if luded it on <i>Schedule I:</i> Y	you know our Income			
(Off	ficial Form 10	6l.)					Your expe	nses
4.	The rental or payments and	r home owners d any rent for the	hip expen e ground o	ses for your residence. In r lot.	nclude first mortgage	4. \$		0.00
	If not include		-					
	4a. Real e	state taxes				10 ft		70.45
		ty, homeowner's	s, or renter	s insurance		4a. \$ 4b. \$	-	72.15 0.00
	4c. Home	maintenance, re	pair, and u	pkeep expenses		4c. \$		50.00
_		wner's associat				4d. \$		55.00
5.	Additional m	ortgage payme	ents for yo	ur residence, such as hor	me equity loans	5. \$	-	0.00

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Debtor 1 Debtor 2			avis Clauden Clauden	Case nun	nber (if known)	19-60889
6.	Utilit	ies:				
	6a.	Electricity	, heat, natural gas	6a.	. \$	111.00
	6b.	Water, se	wer, garbage collection	6b.	\$	41.00
	6c.	Telephon	e, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
	6d.	Other. Sp	ecify: Cells	6d.	\$	75.00
		Cable &	Internet		\$	175.00
		Heating			\$	33.34
7.	Food		ekeeping supplies	7.	\$	485.00
8.	Child	care and	children's education costs	8	\$	0.00
9.			lry, and dry cleaning	9,	\$	62.00
10.	Pers	onal care	products and services		\$	0.00
11.			ntal expenses	11.	a '	200.00
			Include gas, maintenance, bus or train fare.	5.7	.=	200.00
	Do no	ot include o	ar payments.	12.	\$	193.33
13.	Enter	rtainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
14.	Char	itable conf	tributions and religious donations	14.	\$	20.83
15.	Insur					
			nsurance deducted from your pay or included in lines 4 or 20.			
		Life insura		15a.		0.00
		Health ins		15b.	\$	0.00
	15c.	Vehicle in	surance	15c.	\$	232.00
			urance. Specify:	15d.	\$	0.00
16.	Taxes	s. Do not ir	nclude taxes deducted from your pay or included in lines 4 or 20.		>	
		ify: PP T		16.	\$	66.67
17.			ease payments:			
			ents for Vehicle 1	17a.		0.00
			ents for Vehicle 2	17b.		0.00
		Other. Sp		17c.		0.00
		Other. Sp		17d.	\$	0.00
18.	Your	payments	of alimony, maintenance, and support that you did not report as	10	¢.	0.00
10			your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		
19.			s you make to support others who do not live with you.	Jara	\$	0.00
20	Speci		anticomponent and included in the set of state to the set of the s	19.	•	
20.	20a	r real prop Mortgage	erty expenses not included in lines 4 or 5 of this form or on Sches s on other property	20a.		0.00
		Real estat		20a. 20b.		0.00
			homeowner's, or renter's insurance	20b. 20c.		0.00
			noneowners, or renters insurance			0.00
			er's association or condominium dues	20d.		0.00
24				20e.		0.00
21.		r: Specify:	Personal Grooming	21.	+\$	130.00
		Gas Oil I			+\$	316.67
		s Sports			+\$	75.00
			mmuting Roxboro NC		+\$	119.00
	Scho	ool lunch	es and snacks		+\$	43.33
22.	Calcu	ılate vour	monthly expenses			
			through 21.		\$	2,706.32
			2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,700.32
			a and 22b. The result is your monthly expenses.		, ————————————————————————————————————	2 702 00
	220.7	Add IIIIG ZZ	a and 22b. The result is your monthly expenses.		Φ	2,706.32
23.			monthly net income.			
			12 (your combined monthly income) from Schedule I.	23a.	\$	3,306.61
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	2,706.32
	23c.		our monthly expenses from your monthly income.		•	600.00
		The result	is your monthly net income.	23c.	\$	600.29
24.	For exa	ample, do yo cation to the	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect your terms of your mortgage?	ou file this mortgage	s form? payment to incre	ase or decrease because of a
	■ Ye	s.	Explain here: Son goes to a Mental Health Counseler every	two we	eks.	
	. •		Mary St.			

Clauden, Frank and Andrea - 19-60889

AARON INC. 3130 HALIFAX RD SUITE P SOUTH BOSTON, VA 24592

AT&T MOBILITY P.O. BOX 536216 ATLANTA, GA 30353-6216

C & F FINANCE COMPANY P.O. BOX 2129 RICHMOND, VA 23218

C & F FINANCE COMPANY CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA 23060

CENTURY LINK
P.O. BOX 1319
CHARLOTTE, NC 28201-1319

CITIFINANCIAL P.O. BOX 183172 COLUMBUS, OH 43218-3172

COLLEGE LOAN CORP. C/O ACS P.O. BOX 7051 UTICA, NY 13504-7051

COUNTY OF HALIFAX, VA RUTH S. OAKES, TREASURER P.O. BOX 825 HALIFAX, VA 24558

COUNTY OF HALIFAX, VA LINDA S. FOSTER, TREASURER P.O. BOX 825 HALIFAX, VA 24558

DISH NETWORK
DEPT. 0063
PALATINE, IL 60055-0063

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DUKE MEDICINE 5213 SOUTH ALSTON AVE. DURHAM, NC 27713

H&K ENTERPRISES, LLC RENTAL STORAGE BUILDINGS P.O. BOX 278 PARIS, TN 38242

IRS
P.O. BOX 7346
PHILADELPHIA, PA 19101

JEFFERSON CAPITAL SYSTEMS, LLC 16 MCLELAND RD SAINT CLOUD, MN 56303

LABCORP P.O. BOX 2240 BURLINGTON, NC 27216-2240

LCA COLLECTIONS
P.O. BOX 2240
BURLINGTON, NC 27216-2240

NAVIENT P.O. BOX 9500 WILKES BARRE, PA 18773-9500

OPTIMUM OUTCOMES, INC. P.O. BOX 660943 DALLAS, TX 75266-0943

PERSON FAMILY MEDICAL CENTER, INC. 702 N MAIN ST. ROXBORO, NC 27573-4755

PORTFOLIO RECOVERY ASSOCIATES, LLC P.O. BOX 12903 NORFOLK, VA 23541

PROFFESSIONAL RECOVERY CONSULTANTS P.O. BOX 603586 CHARLOTTE, NC 28260-3586

Clauden, Frank and Andrea - 19-60889

RPM P.O. BOX 1548 LYNNWOOD, WA 98046-1548

RS, INC. P.O. BOX 8630 RICHMOND, VA 23226-0630

SOURCE RECEIVABLE MANAGEMENT P.O. BOX 4068 GREENSBORO, NC 27404

TACS P.O. BOX 31800 HENRICO, VA 23294-1800

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